

Medicare Plan Selection

Customized for
JOE CLIENT

Recommended Medicare Plans		
See more information, beginning on PAGE 6	PART D PLAN: Caring Company Drug Plan 123 (PDP) — 1-555-555-5555	MEDIGAP POLICY: Covering Gaps Company, Plan G — 1-666-666-6666
Any top line information about the plans selected.		
IMPORTANT: We've substituted generic medications for any brand drugs, unless you indicated otherwise.		

IMPORTANT: *Your report includes expert analysis and detailed findings of your recommendations.*

Before making any final decisions, please double-check all costs with the plans and/or pharmacies.

The Medicare plan data is from [medicare.gov](https://www.medicare.gov) and CSG Actuarial, and this information is subject to change.

The benefit information provided is a brief, but not complete, description of benefits. For more information, contact the plan.



IMPORTANT:

The following provides you with plan analysis and guidance utilizing information available through Medicare.gov. **Before making any final decisions, please double-check all costs with the plans or pharmacies.** Information available through Medicare.gov may not be the most current information available.

65 Incorporated does not make decisions or choices as to which option is best for a particular client; that is the obligation of each client, after carefully considering the information contained on *65incorporated.com* and from other sources. We urge our clients to study all the options carefully.

The plans *65 Incorporated* identified for your consideration are generally cost-effective with a quality rating of 3.0 stars or higher.



2023 Medicare Information:

- The standard drug plan deductible is \$505.
- The standard Part B monthly premium is \$164.90.
- The donut hole for generic medications closed in 2020. The donut hole for brand-name medications closed in 2019. Those who reach this payment stage (Coverage Gap) will be responsible for paying 25% of the total cost of any drug. Read more at www.65incorporated.com/topics/medicare-part-d-prescription-drug-plans/medicare-donut-hole-closing.



About Your Medicare Plan Selection Report:

- This report reviews plans in three general categories: **Cost, Quality and Coverage**.
 - Some people prioritize price above all else. However, without quality and coverage, you could spend a great deal of time finding physicians who will see you or trying to get the medications you need. Getting the best overall plan for your situation can be worth a bit more.
- Three colors spotlight important information.
 - **Green** identifies a good characteristic, **yellow** identifies a finding that merits caution, and **red** identifies a finding that is dangerous.
- Medicare evaluates plans on a five-star basis.
 - Five stars is the highest level of quality. You can choose to switch to a plan with a five-star rating at any time during the year, not just during Open Enrollment.
 - Any plan that has received less than three stars for three years in a row will receive a low-performing rating and icon from Medicare. If you choose to enroll in a plan with a low performance rating, you must call the plan; Medicare does not allow online enrollment.
- Learn more about star ratings at www.65incorporated.com/blog/2016/11/medicare-star-ratings-q.

Step-by-Step Instructions

for enrolling in Medicare plans

1. Follow the steps to enroll in Medicare as listed in your i65 RoadMap report.

2. Enroll in a Part D prescription drug plan.

- Do this after receiving your Medicare card or confirmation of enrollment.
- The plan recommended is:

PDP PLAN NAME — PDP PHONE NUMBER

- Refer to the Medicare Part D section of your report to read more about your specific plan options.
- Enroll in this plan in one of three ways:

1. Enroll through your MyMedicare account.

- * Log into your MyMedicare account.
- * Find the specific plan you'd like to enroll in using the Medicare.gov plan finder tool by clicking on the "Compare Plan Details" button, and then click on the blue "Explore Other Plans" button under the 2023 column.

OR

If you cannot see the "Compare Plan Details" button on your Medicare account, click on the "Health & Drug Plans" text link in the upper right corner and then click on the "Find Health & Drug Plan" link from the pop up menu.

- * On the next screen, enter your zip code, select "Drug plan (Part D)" from the drop down menu, and click the blue "Apply" button. Then click the green "Start" button.

- * Answer the next few questions and you may choose whether or not to enter your medications.
- * Scroll down to find the name of the plan you'd like to enroll in for 2023, and then click the green "Enroll" button under that plan's listing. Then, follow the steps to complete your enrollment.

***IMPORTANT:** Before you officially enroll in a plan, double-check that you're enrolling in the correct plan. Many insurance carriers offer plans with similar names.*

2. Call the company to enroll in this plan using the phone number provided or on the company's website.

3. Purchase this coverage through an agent licensed to the plan.

- Before enrolling, be sure to verify the monthly premium and indicate the day that you want the plan to take effect.

3. Select and purchase a Medigap policy (Medicare supplement insurance).

- Do this after receiving your Medicare card or confirmation of enrollment.
- Through your consultation, we narrowed your selection to:

MEDIGAP COMPANY, MEDIGAP PLAN — MEDIGAP PHONE

- Contact an insurance agent licensed to sell this coverage or call a company customer service representative and follow these steps to enroll:
 - * Verify the monthly premium and benefits.
 - * Indicate the date that you want the plan to take effect.
 - * Complete the enrollment process.




4. Ensure that the last day of any existing coverage you have is the day before Medicare begins.

5. Pay attention to your costs and coverage throughout the year.

- During Open Enrollment (October 15-December 7), compare your drug plan against others that will be available. If there is a better option, enroll in the plan and it will take effect January 1.
- If you decide to continue with your current plan, take no action and the plan will renew automatically.
- 65 Incorporated can provide an unbiased review of your coverage. Visit www.65incorporated.com/open-enrollment for more information.
- IMPORTANT: Be aware that Open Enrollment is NOT for changing Medigap policies.
 - * In most states and situations, you after you've been enrolled in Medicare Part B for six month, you no longer have a Guaranteed Issue Right to get a new policy.
 - Without a Guaranteed Issue Right, insurance companies can medical underwriting when you want to add benefits or change policies. This means:
 - The insurance company can ask you questions about your health.
 - Based upon your answers, the insurance company can raise premiums or deny you coverage.
 - * Read more at www.65incorporated.com/topics/original-medicare/what-guaranteed-issue-right.

Medicare **Part D** Plan Comparison

Medicare Part D PLAN COMPARISON

		PLAN OPTION #1	PLAN OPTION #2	PLAN OPTION #3
		PDP PLAN NAME	PDP PLAN NAME2	PDP PLAN NAME3
 Cost	DRUG PLAN COSTS			
	Monthly plan premium	\$22.50	\$25.50	\$13.00
	Deductible	\$310.00	\$480.00	\$480.00
	TOTAL DRUG COSTS — <u>INCLUDING PREMIUMS</u>			
	Walgreens	\$200.00	\$800.00	\$1,600.00
	CVS	\$325.00	\$600.00	\$1,800.00
	Mail Order	\$750.00	\$925.00	\$700.00
 Quality	PLAN QUALITY RATINGS			
	Overall star rating	4	4	4
 Coverage	DRUG FORMULARY			
	Plan covers all prescriptions	Yes	No	No
	A formulary is a listing of medications (generics and brand-names) that a drug plan will cover. Every plan has a different formulary.			

More about the Recommended **Part D Plan**

The attachments to this report include complete details about cost, coverage, and quality.

AARP MedicareRx Walgreens (PDP)

Copays or coinsurances by tier in this plan's formulary — using preferred retail pharmacies, if available.		# of drugs in this tier
Tier 1:	\$0.00	0
Tier 2:	\$10.00	0
Tier 3:	\$40.00	0
Tier 4:	40%	1
Tier 5:	27%	0
Tier 6:	n/a	0
<i>Coinsurances are percentage of the total cost of the medication that you will pay as an out-of-pocket cost. This means that the amount you pay for your medications can increase, sometimes dramatically during a year, if the cost of a medication increases.</i>		
Step therapy required?	No	
<i>In most cases, this means that before prescribing a medication (usually an expensive one), the physician must order a less expensive but proven-effective medication. If the individual experiences side effects or other problems, the physician can then “step” up to the more costly drug.</i>		
Prior authorization required?	No	

Prior authorization means that an insurance company must give permission before a patient can fill a particular medication.



Important Points about Your Drug Plan Review

- The best plan for you in 2022 is the **AARP MedicareRx Walgreens (PDP) — 1-800-753-8004**
 - You take two medications.
 - * **One medication is not covered by any Part D drug plan in your area.** This medication is available through GoodRx for \$227.59 — better than the price through any Part D insurance plan.
 - You will have coverage of medications in case you need to take new prescriptions during the year.
 - The most cost-effective pharmacy for refilling your prescription is Walgreens.
- This plan has a good 4-star rating.
- It has a \$310.00 deductible which you will face with the prescription you take.
- Check these links for additional information.
 - Preferred pharmacies www.65incorporated.com/topics/medicare-part-d-prescription-drug-plans/corner-pharmacy-may-not-be-your-best-deal
 - Medicare prescription drug coverage www.medicare.gov/Pubs/pdf/11109-Your-Guide-to-Medicare-Prescription-Drug-Coverage.pdf
 - Donut hole (Coverage Gap) www.65incorporated.com/topics/medicare-part-d-prescription-drug-plans/know-about-drug-discounts-coverage-gap

*Drug pricing and cost information in this report is from the Medicare Plan Finder (www.medicare.gov/plan-compare/#/?lang=en).
Please double-check the drug plan's evidence of coverage for more information or contact a plan customer service representative.*

Medicare Supplement (Medigap) Plan Selection

Medicare Supplement PLAN COMPARISON

PLAN OPTION #1

Old Surety Life Insurance Co.

PLAN OPTION #2

AARP Medicare Supp by
Unitedhealthcare



FACTORS IMPACTING PLAN COST

Policy Pricing Structure

Issue Age Rated

Community Rated

Monthly Premium

\$101.39

\$125.79

Household Discount

0%

7%

Average 5 Yr. Price Increases

14.0%

5.0%

Loss Ratio (% of revenue used for
medical expenses rather than profit)

72.0%

72.0%



FACTORS OF PLAN QUALITY

AM Best Rating

N/A

A+

Years in Market

27

24

Market Share (*Higher market share
lets a company use economies of scale
to keep overhead lower*)

0.79%

22.9%



MEDICARE SUPPLEMENT PLAN TYPE

Plan Type

Plan G

Plan G

Justification for the
Plan Type

Plan G provides the most comprehensive coverage of any plan option available to you. You will be responsible for paying the Part B annual deductible, but most, if not all, of any other healthcare costs will be covered.

Important Points about Your Medigap Review

- We've recommended the **Old Surety Life Insurance Co, Plan G — 800-272-5466**.
 - This is an Issue Age rated policy.
 - This plan has the best overall data points of any plan available to you.
 - * This plan has a track record of 1.7% premium increases.
 - * The Loss Ratio is low at 64%. As long as this does not increase above 80%, the likelihood of premiums increasing in the near future is low.
 - A loss ratio is the percentage of premiums that are spent paying out health claims.
 - The US government has said that insurance companies can keep up to 20% of all premiums as profit. Thus, any number higher than 80% means that you will most likely see premium increases in the coming year as the insurance company is essentially "leaving money on the table."
 - * It has a low, but very acceptable, market share but very long market history (which is good).
 - If the company were to go out of business, you would have a Guaranteed Issue Right to get a new Medigap policy (meaning no medical underwriting and no chance to be denied coverage).
 - * At \$101.39, it is very competitively priced for all of the factors mentioned above.
 - The AARP Medicare Supplement Plan G is a solid alternative, if you don't like going with a smaller company like Old Surety.

- A Plan G Medigap policy provides the most coverage you can get of any Medigap policy.
 - Coverage of foreign travel emergencies is included with this coverage.
 - These plans allow you to essentially pay the monthly premium and then have few, if any, additional costs for healthcare.
 - Other types of Medigap plans provide lower monthly premiums but with fewer overall benefits.
 - * In our experience, the long-term savings in premiums for these lesser coverage policies usually do not make up for the lack of benefits.
- For more information about Medigap policies, please refer to the “Purchasing a Medigap Policy - A Companion Guide” in the attachments section of this report.

Additional Information

► Dental and Vision Services

- Medicare does not cover routine dental services. Stand-alone policies are available.
 - * Medicare will pay for dental services that are an integral part either of a covered procedure (e.g., reconstruction of the jaw following accidental injury), or for extractions done in preparation for radiation treatment for neoplastic diseases involving the jaw.
 - * Medicare will also make payment for oral examinations, but not treatment, preceding kidney transplantation or heart valve replacement, under certain circumstances.
- **The most important tip we can provide related to dental insurance is to talk with your dentist.**
 - * Dentists typically make less money when a client uses dental insurance and the client typically overpays for dental coverage.
 - * For this reason, more dentists are creating pre-payment plans that provide you with discounts on services. Thus, you pay less overall and the dentist makes more overall.
 - * Dentists may also have good insights into which insurance plans work better than others.
- These resources provide insightful guidance to help answer the question, “Is it worth it to get dental and vision insurance?”
 - * Investopedia, “Guide to Dental Insurance”—<https://medicare-links.com/about-dental-insurance>
 - * Investopedia, “Is Vision Insurance Worth It? What You Should Know”—<https://medicare-links.com/about-vision-insurance>

- Check these links to learn more about specific dental policies.*
 - * Delta Dental—www.deltadental.com
 - * AARP Dental (administered by Delta Dental)—www.aarp.org/benefits-discounts/all/delta-dental
 - * Anthem Blue Cross Blue Shield—www.anthem.com/individual-and-family/dental-insurance
 - * Humana—www.humana.com/dental-insurance
 - * Aetna—www.aetna.com/individuals-families/buy-dental-coverage.html
- Check these links to learn more about specific vision policies.*
 - * VSP—www.vspdirect.com
 - * Humana—www.humana.com/vision-insurance
 - * Aetna—www.aetna.com/insurance-producer/vision-insurance.html
- **Dental and vision savings plans also exist.** These are not insurance plans. You pay a monthly fee to have access to a specific schedule of discounts from opt-ed in providers.
 - * Dental Save—<https://dentalsave.com>
 - * Patriot Health—<https://www.patriothealth.com/>
 - * A comparison tool for various savings plans—<https://www.dentalplans.com>

**65 Incorporated does not sell insurance or make monies from insurance sales.
These links are provided for your convenience only.*



Disclaimer:

65 Incorporated provides guidance and information to our clients, based primarily on third-party sources, so that our clients can make informed decisions after reviewing their options. This report includes costs and coverage data from the Medicare Plan Finder at [medicare.gov](https://www.medicare.gov). In some cases, the drug costs reported may differ from actual costs. Generally, 65 Incorporated does not include in its discussion plans that are new, do not have quality ratings, or have low quality ratings. Clients should investigate plans and address any specific concerns about premiums, costs, and coverage with the insurance company.

65 Incorporated does not make decisions or choices as to which option is best for a particular client; that is the obligation of each client, after carefully considering the information contained on [65incorporated.com](https://www.65incorporated.com) and from other sources. We urge our clients to study all the options carefully. 65 Incorporated disclaims responsibility for any option chosen by a client, and for the information prepared by third party sources. In the event of any claim by a client against 65 Incorporated, the liability of 65 Incorporated shall be limited to the consideration paid by such client to 65 Incorporated.

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Medicare Plan Selection Attachments